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Bib Data Sheet

CONFIRMATION NO. 8412

SERIAL NUMBER 10/689,567	FILING OR 371(c) DATE 10/20/2003 RULE	CLASS 351	GROUP ART UNIT 3735	ATTORNEY DOCKET NO. 27109-28/VOL-1733 PA
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APPLICANTS

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** CONTINUING DATA *****

This appln claims benefit of 60/419,447 10/18/2002 *grt*

** FOREIGN APPLICATIONS *****

(none) *grt*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED **
01/17/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY OH	SHEETS DRAWING 2	TOTAL CLAIMS 22	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <i>[Signature]</i> Examiner's Signature	<i>[Signature]</i> Initials			

ADDRESS

23368

TITLE

Ophthalmoscopy lens system

FILING FEE RECEIVED 936	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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